
***Glasnik hemičara i tehnologa
Bosne i Hercegovine
Bulletin of the Chemists and Technologists of
Bosnia and Herzegovina***



57

December, 2021.

**Univerzitet u Sarajevu - Prirodno-matematički fakultet, Sarajevo
University of Sarajevo - Faculty of Science, Sarajevo**

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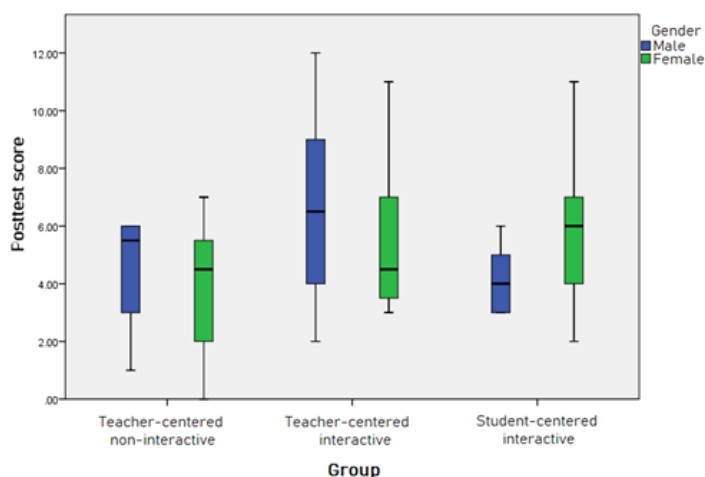
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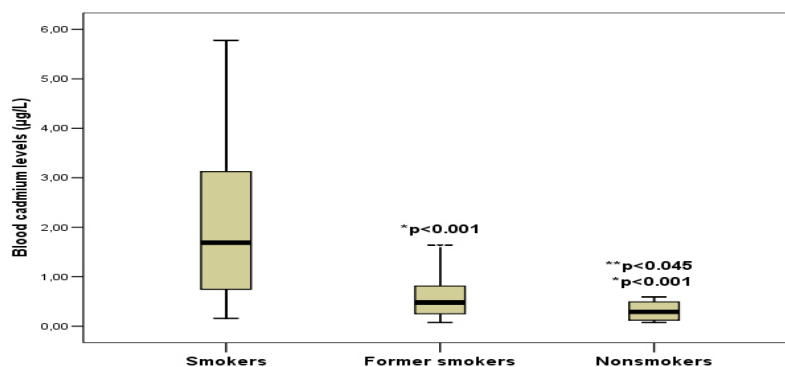
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Editorial

Potential drugs for oral treatment of COVID-19

A substantial number of patients with COVID-19, mostly older and those with preexisting chronic diseases need hospitalization, because of clinical progression to severe disease. Therefore, despite several vaccines in use, antiviral therapies that reduce the risk of COVID-19 progression are needed. Oral administration of such therapies would be ideally for the patients, who would easily use it by themselves. So far only one combination of antiviral drugs was approved for emergency use. As reported by manufacturer, combination of nirmatrelvir and low dose of ritonavir is an investigational SARS-CoV-2 protease inhibitor antiviral therapy, for oral administration. Nirmatrelvir is designed to inhibit replication of coronavirus, and low dose of ritonavir, helps maintaining adequate concentration of nirmatrelvir, by slowing down its metabolism and breakdown. It is not authorized for the pre-exposure or post-exposure prevention of COVID-19 or for treatment in those requiring hospitalization due to severe or critical COVID-19. The U.S. Food and Drug Administration issued an emergency use authorization for this combination, which is different than an approval, in a sense that Agency determined that there is a reasonable believe that this combination can be effective in treatment of mild to moderate COVID-19 in authorized patients (adults and pediatric patients (12 years and older) with positive results of direct SARS-CoV-2 testing and who are at the risk for progression to severe COVID-19, including hospitalization or death), and that potential benefits outweigh the known and potential risks of the product. It is not authorized for use for longer than five consecutive days. So far there are no adequate, approved and available alternatives for the treatment of COVID-19, although some results of the phase 3 of clinical trial published on 16th December 2021, showed that oral molnupiravir (small-molecule ribonucleoside prodrug of n-hydroxycytidine) was found to be effective (significant reduction of hospitalization or death) for the early treatment of COVID-19 (within five days after the onset of signs and symptoms) without evident safety concerns, in the population of nonhospitalized, unvaccinated adults, who were at risk for the progression to severe disease.

Editors



Seeking the right balance between three teaching approaches: a quasi-experimental study in the context of learning about thermal phenomena

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Abstract: In this study, we investigated which teaching approach may be optimal to facilitate learning about thermal phenomena in primary school. Concretely, we conducted a pretest-posttest quasi-experiment that included 45 eighth-grade students divided into three groups. In the first group (a non-interactive teacher-centered approach), the teacher gave an experiment-based lecture on converting thermal energy into mechanical work. In the second group (a teacher-centered interactive approach), the teacher gave the same experiments-based lecture, but interacted much more with the students and encouraged them to think about the demonstrations. Finally, in the third group, the student-centered interactive approach was applied. The results of the ANCOVA showed that the three teaching approaches were equally effective in developing students' understanding of thermal phenomena. However, closer analyses showed that students who learned from the teacher-centered interactive approach significantly outperformed their peers when it came to understanding basic thermal concepts approach, students worked in small groups to conduct the same experiments and "discover" the same relationships that the teacher had introduced in the previous one.

INTRODUCTION

Understanding thermal phenomena and thermodynamics is an important aspect of scientific literacy and this topic has found its place in science curricula at all educational levels. It is well known that many students have difficulty, understanding the basic concepts of thermal phenomena and thermodynamics (Vidak, Odžak & Mešić, 2019, Erickson, 1979, Carlton, 2000, Clough & Driver, 1985, Tiberghien's, Chu, Treagust, Yeo and Zadnik, Lewis (1996). In order to effectively overcome students' misconceptions, it is necessary to make additional efforts in the processes of conceptualization and conceptual change and therefore it is of great importance to design teaching lectures that will facilitate a better understanding of these phenomena. The literature shows that there is no consensus on which teaching approach is most useful in all physical contexts, so it is very important to determine the best approach for

different contexts. One of the ways we can improve traditional teaching (a non-interactive teacher-centered approach) is to conduct experiments. In this approach, we can direct students closer to the theory and motivate them in studying physics phenomena. When performing the experiment, we can use the predict-observe-explain technique and predict-explain-observe-explain technique to foster conceptual understanding. The predict-observe-explain technique implies that students predict what will happen before performing the experiment, then observe what will happen and finally the students together with the teacher through a discussion come to an explanation of the observed phenomenon. The predict-explain-observe-explain technique consists of one additional element that is reflected in students explaining why they think what they predicted will happen even before the experiment is performed. Many studies have shown that research-based teaching (a teacher-centered interactive approach) can help students to increase their level of

conceptual understanding and gain a positive attitude toward science (Akar, 2005; Coulson, 2002; Tinnin, 2001). In the research of conceptual abilities using the CSEM test, students taught with the investigative teaching achieved higher results on the posttest i.e. students of four different lecturers achieved a score between 63% and 74%, while the average for their level of education was 47% (Etkina i Van Heuvelen, 2007). Furthermore, a comparative study conducted in 2004 showed that students taught by the investigative teaching method achieved 15% higher results than students taught by a non-interactive teacher-centered approach (73% of correct answers compared to 58% of correct answers) (Etkina i Van Heuvelen, 2007). In general, when using any teaching method it is important to consider the influence of cognitive load. Teachers often place high demands on working memory resources resulting in poor ability of students to learn the given materials. The working memory resources needed to learn a particular material (Sweller and Chandler, 1994) or to perform a particular task (Sweller et al., 1998) represent a cognitive load. The total cognitive load is equal to the sum of the intrinsic, relevant, and irrelevant cognitive load (Pass, Tuovinen, Tabers & Van Gerven, 2003). The relevant cognitive load leads to the adoption of new knowledge and automation of existing ones, as well as to the expansion of existing knowledge structures. By optimizing the intrinsic and minimizing the irrelevant cognitive load, the conditions for maximum student productivity are achieved. To achieve this goal (Van Merriënboer & Sweller, 2005) stated that it is useful to divide lectures into smaller "pieces" and provide explicit clues as well as to use external visualizations and analogies. Hardiman, Pollastek & Ewil (1986) and Brown & Campione (1994) stated that students who learn through investigative teaching with minimal feedback often become lost and frustrated, and their confusion can lead to misconceptions. Moreno (2004) concludes that there is a growing number of research showing that students learn with more understanding when investigative teaching is a more teacher-centered approach. In our study, we used all the scientific recommendations to balance the cognitive load of students and direct their attention to the optimal understanding of given thermodynamic phenomena.

Aim of the present study

The aim of our study is to investigate students' conceptual understanding of the transformation of the inner energy into work, as well as the effects of different teaching approaches (teacher-centered interactive approach and student-centered interactive approach) compared to a non-interactive teaching teacher-centered approach. The results of methodological research in Bosnia and Herzegovina indicate that the interactive instruction approach is not sufficiently used (Suzić et al., 2009). The significance of this research is reflected in the fact that we will compare the achievement of a non-interactive teacher-centered teaching with two approaches of interactive teaching in developing a conceptual understanding of the transformation of internal energy into work and influence of individual teaching approaches to the aimed area. The results of this research can serve to improve the quality of

interactive teaching implementation in the field of heat phenomena.

METHODOLOGY

Research design

In order to investigate the effectiveness of different teaching approaches, a quasi-experimental research was conducted as part of the regular classes determined by the curriculum. The total sample of students consists of three classes. One week before the start of the treatment a pretest was conducted. The pretest consisted of ten conceptual multiple choice questions that reflected the students' misconceptions about the material relevant to the successful learning of the lecture "Turning internal energy into work". Seven days after the treatment, a posttest was conducted in which we measured the conceptual understanding of converting internal energy into work (closed-relevant conceptual questions) and elemental conceptual questions relevant to understanding the conversion of internal energy into work (broadly-relevant conceptual questions). To conduct pretest and posttest we allocated 25 and 35 minutes.

Participants

This study included 45 eighth-grade primary school students from the Primary School "Nova Bila" in Nova Bila, Bosnia and Herzegovina, of whom 20 were male and 25 female. The curriculum of the course includes that students learn about internal energy and heat in a two-hour lecture that is situated in the second semester of the school year. The total sample of students consists of three classes. One class received non-interactive teacher-centered treatment, while the remaining two received two different versions of the interactive teaching approach.

Curriculum and teaching treatment

In our research, quasi-experimental study was conducted as part of the regular class determined by the curriculum. Students in all three eighth grade classes were in their natural environment. When creating lectures, special accent was put on the content and conceptual questions. The questions in the introductory part of the lecture, experiments and the accompanying explanations, and the final part of the lecture were synchronized in all three groups. The questions from the pretest and posttest were not directly addressed during the treatment, but a theoretical basis for understanding these questions through the contents of the main part of the lecture was provided. It is well known that teacher-centered non-interactive teaching approach is characterized by one-way communication. Accordingly, the department taught in the teacher-centered non-interactive approach was characterized by one-way communication. The researcher solely performed a repetition of the relevant material, as well as the implementation of the main and final part of the lecture. In the class taught by teacher-centered interactive approach teaching students were interactively involved in the teaching process. The repetition of relevant material was conducted through conversation with students, the experiments were performed using the predict-explain-observe-explain

technique and the final part of the lecture was conducted through the questions which the researcher posted to the students. The third class was divided into four groups. The groups were composed of students of different abilities, according to the results of the pretest. Students conducted part of the lecture in independent activities, and the other part interactively with the researcher. The introductory part of the lecture was implemented through a conversation, after which the students were focused on group work. The group work has been conducted using the pre-created worksheets and experimental kit according to which students were guided step by step to the final explanation. After the students come to the final explanation of the outcome of the physical experiment through group work, the researcher explains it once again through a conversation with all the students. The final part of the lecture was conducted through a conversation between the researcher and the students.

RESULTS AND DISCUSSION

a) Analysis of the pretest scores

Within the group taught by teacher-centered non-interactive approach (TNI), there were 12 participants (Male=4, Female=8), 18 participants were taught by a teacher-centered interactive approach (TI) (Male=10, Female=8) and 15 (Male=6, Female=9) were student-centered interactive (SI). The pretest results show that the mean value of the TNI-group, TI-group and SI-group was 2.83 (1.46), 3.67 (1.84) and 3.40 (1.50), respectively, while the maximum score that students could achieve in the pretest was 10. The minimum score achieved in the TNI-group was 1, while maximum was 5; minimum score achieved in TI-group was 0, while maximum was 6; minimum score achieved in SI-group

was 0, while maximum was 5. Table 1 shows the summarized data. The conceptual questions in the pretest reflect the content of the chapter "Internal energy and heat" in the regular curriculum. According to the results, students have a lot of difficulties in understanding thermodynamic concepts. According to the data in Table 2, we can conclude that students' scores on many questions are below 50 % for each group. Scores on Q1, Q2, Q5 and Q9 are very low for each group. The questions Q1, Q2, and Q5 relate to heat transfer from one object to another, while question Q9 relates to the particle movement in a closed container. The cause of the low scores on questions Q1 and Q5 can be attributed to the fact that students relied on their sensory experiences. Accordingly, students for objects that feel colder claim to be at a lower temperature and conclude that the insulator between two objects act as a heat source. Numerous students answered the question Q1 claiming that the metal would have the lowest temperature (TNI=83.3%, TI=77.8% and SI=86.7%). Question Q2 identified eventual misconception within the physics language and terminology, which is closely related to the heat transfer. To this question, most students replied that coldness is transferred from water to eggs (TNI=66.7%, TI=77.8% and SI=86.7%). As mentioned earlier, research by Chu, Treagust, Yeo and Zadnik (2012) found that students observe a sweater as a heat source rather than a thermal insulator, as confirmed by our research. It is interesting to emphasize that the question Q6 identified an identical misconception in a different context and that groups TI and SI were more successful with this question. Finally, all groups were equally unsuccessful on question Q9. Numerous students chose answer D (TNI=41.2%, TI=50% and SI=40%) as the correct answer i.e. the particle trajectory is circular.

Table 1. The pretest achievements

	Number of participants	Male	Female	Mean value (standard deviation)	Minimum value	Maximum value
TNI-group	12	4	8	2.83 (1.46)	1	4
TI-group	18	10	8	3.67 (1.84)	0	6
SI-group	15	6	9	3.40 (1.50)	0	5

Table 2. Summary of the individual groups scores on the pretest

	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10
TNI-group	16.7%	16.67%	33.3%	83.3%	16.7%	16.7%	16.7%	33.3%	16.7%	33.3%
TI-group	11.1%	16.67%	72.2%	72.2%	16.7%	33.3%	55.6%	66.7%	11.1%	11.1%
SI-group	6.7%	6.7%	66.7%	73.3%	13.3%	33.3%	20.0%	73.3%	13.3%	40.0%

Between-group differences are presented in the following two figures. The x-axis shows the percentage of students who achieved the score presented on the y-axis.

Figure 1 shows between-group differences on the pretest for the teacher-centered non-interactive group and the teacher-centered interactive group.

We can notice the significant deviation in the number of students who have score 4 in different groups. Furthermore, 11.1% of students have score 0 in the teacher-centered interactive group while in the teacher-centered non-interactive group there were no such students.

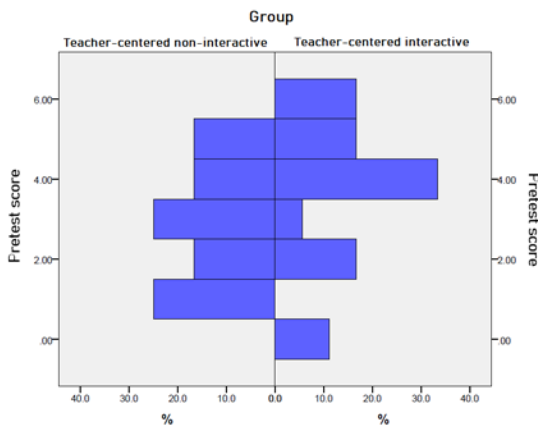


Figure 1. Between-group differences for teacher-centered non-interactive and teacher-centered interactive groups. The maximum score was 10.

If we compare the teacher-centered non-interactive and the student-centered interactive group (Figure 2), we can notice a deviation in some categories for the students from the SI group. We can see from the Figure 2 that 6.7% of students achieved a score 0 from the SI group, while there were no students with such score in the TNI group.

Furthermore, 25% of the students from the TNI group achieved score 1 on the pretest, while in the SI group the percentage was 0. Score 2, 4 and 5 on the pretest were

achieved by 16.7% of the students from the TNI group while that percentage in the SI group was 26.7%, 33.3%, and 26.7%, respectively. If we consider the mean value, we can notice that there is no significant variation between groups and we cannot emphasize an overlap based on the test scores.

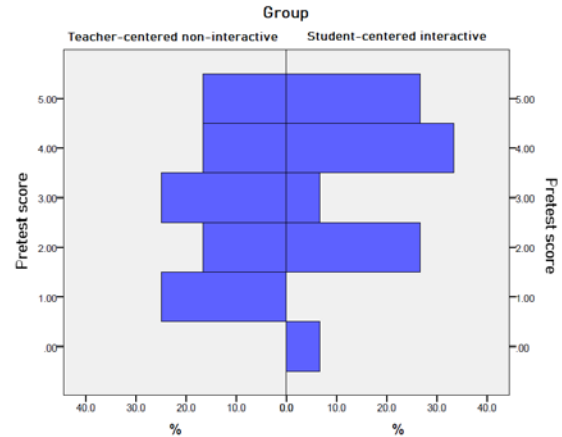


Figure 2. Between-group differences for teacher-centered non-interactive and student-centered interactive groups on the pretest. The maximum score was 10.

For the homogeneity of the variance on the pretest, we conducted Levene’s test where the significance value was $p=.728$ ($p>0.05$). Accordingly, we can conclude that there is no significant variation between the group’s variance achieved on the pretest.

We used the Kolmogorov-Smirnov test to check normality of the distribution. For the TNI-group, TI-group and SI-group significances were $p=0.200$, $p=0.008$ and $p=0.010$, respectively. Since the significance for the TI group is $p=0.008$ ($p<0.05$) we can conclude that the distribution varies from the normal one. We used Kruskal-Wallis’s test whose significance was $p=.309$, from which we can conclude that there is no statistical significance between groups on the pretest. Table 3 shows between-group differences on the pretest scores.

Table 3. Between-group differences on the pretest scores

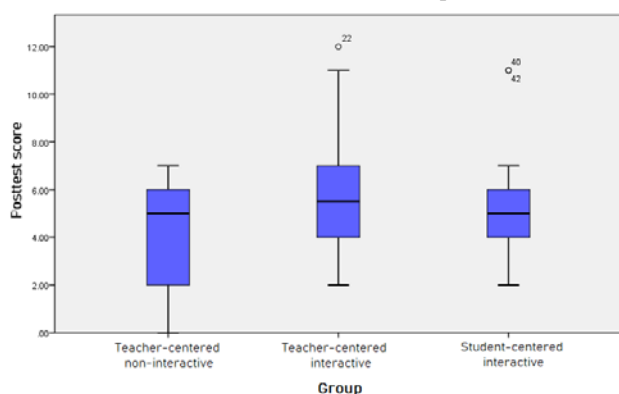
(I) Group	(J) Group	Significance
Teacher-centered non-interactive	Teacher-centered interactive	.370
Teacher-centered interactive	Student-centered interactive	.888
Student-centered interactive	Teacher-centered non-interactive	.649

b) Analysis of the posttest scores

The posttest consisted of fourteen questions, three of which had a multiple sub-questions. All questions were conceptual questions divided into two main groups: closely relevant and broadly relevant questions. Broadly-relevant questions measured the knowledge needed to conceptually understand the target lecture, while closely-relevant questions were closely related to the conversion of internal energy into work. It is important to know that none of the questions from the pretest were on the posttest.

Boxplot diagram in the Figure 3 shows that the median in the teacher-directed interactive group is slightly higher compared to medians in the other two groups (by 0.5). The median for the teacher-centered non-interactive and student-centered interactive group is equal and amounts to 5.00. Score intervals for teacher-centered non-interactive, teacher-centered interactive and student-centered interactive groups are 7.00 (min=.00, max=7.00), 10.00 (min=2.00, max=12.00) and 9.00 (min=2.00, max=11.00), respectively.

Figure 3 Score distribution on the posttest



Furthermore, Figure 4 shows the boxplot diagram for different genders. We can notice that the median is higher for boys in the first two groups, while the median for girls is higher in the student-centered interactive group.

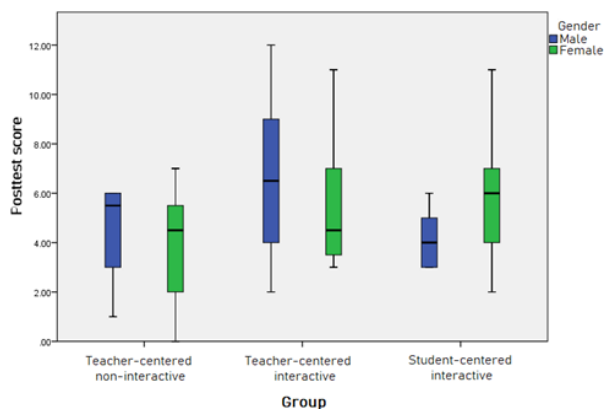


Figure 4. Score distribution according to gender

Table 4 shows the total score S , mean value (MV), standard deviation (SD) and variance (V) in each group, for closely relevant (CR) and broadly relevant (BR) questions, as well as the total value for each question on the posttest. We can immediately notice that the mean value is the highest for the teacher-centered interactive group and amounts to 6.12, for the student-centered interactive group the mean value is 5.40, while for teacher-centered non-interactive it is the lowest and equals to 4.08. Furthermore, we can observe the same order of groups when it comes to the mean value within broadly relevant questions. However, the mean value for closely-relevant questions for the student-centered interactive group is 2.73, for the teacher-directed group is 2.56, and for the teacher-centered non-interactive group is 2.08. We can conclude that the mean value of the scores for the experimental groups for each of the categories is higher than the mean value of scores for the teacher-centered non-interactive group.

Table 4. Scores on the posttest

Teacher-centered non-interactive group			
	CR	BR	S
MV	2.08	2.00	4.08
SD	1.16	1.60	2.27
V	1.36	2.54	5.17
Teacher-centered interactive group			
	CR	BR	S
MV	2.56	3.56	6.12
SD	2.38	1.29	2.89
V	5.67	1.67	8.34
Student-centered interactive group			
	CR	BR	S
MV	2.73	2.67	5.40
SD	2.05	1.05	2.64
V	4.21	1.10	6.97

We can gain a deeper insight into student's progress by considering the score difference on the pretest and the posttest. Since there were ten questions on the pretest, while there were fourteen on the posttest, we perform the scaling of the results by multiplying the pretest score with the factor of 1.4. After that, we performed the following coding: students who scored 0 to 2.8 were put in the low-ability group (L), students who scored 2.8 to 5.6 were put in the medium-ability group (M), and the students who scored 5.6 to 8.4 were put in the high-ability group (H). After scaling and placing the students

in their respective ability groups, we measured the score difference on the pretest and posttest, which is summarized in the following table 5.

Table 5. Mean values difference regard the ability groups

Ability level	Teacher-centered non-interactive
Low	1.84
Medium	-0.76
High	-2.00
	Teacher-centered interactive
Low	4.12
Medium	0.31
High	-0.87
	Student-centered interactive
Low	3.56
Medium	0.13
High	-2.25

We can notice that the average difference of the scores has a tendency to decrease for all groups. Based on this fact, the students from the low-ability group within the teacher-centered interactive group made the greatest progress, followed by students from the low-ability group within the student-centered interactive group, and finally the students from the low-ability group within the teacher-centered non-interactive one. We need to consider this fact with special care. Better insight into group differences could be achieved by using the same pretest and posttest to obtain highly valid considerations. The number of students is too small and there is a danger of the statistical inference (for example, statistically speaking, there is a higher probability for progress of a students who achieved a lower score on the pretest).

All previous considerations were based on the mean value of the scores achieved on the pretest and posttest. Now, we use inferential statistic to determine if there is statistically significant difference between groups. For this purpose, the analysis of covariance is used. Score on the pretest is used as a covariate, while the dependent variables are total pretest scores, followed by the scores on the broadly-relevant questions and, finally, the scores achieved on the closely-relevant questions. To better understand how the covariance (scores on the pretest) adjusts the original mean value and the standard deviation, we will refer to the tables 6 and 7.

Levene's coefficient for these data is .680, from which it is possible to conclude that variances of the score achieved in the posttest are homogeneous. By analyzing the between-group differences, with the posttest as a dependent variable, we determine that the difference between groups are not so statistically significant [$F(2,41)=1.719, p=.192$].

When we choose the posttest scores on the closely-relevant questions as a dependent variable, Levene's

coefficient is .042, which could mean that the results are less reliable. When it comes to the analysis of the covariance, we conclude that there is no statistically significant difference between the presented groups [$F(2,41)=.351, p=.706$].

Table 6. Mean values on the posttest, closely-relevant and broadly-relevant questions. Standard deviations are given in parentheses.

Mean value	Posttest	Closely-relevant questions	Broadly-relevant questions
Teacher-centered non-interactive	4.083 (2.275)	2.083 (1.164)	2.000 (1.595)
Teacher-centered interactive	6.111 (2.888)	2.556 (2.382)	3.556 (1.294)
Student-centered interactive	5.400 (2.640)	2.733 (2.052)	2.667 (1.047)

Table 7. Adjusted mean values on the posttest, closely-relevant and broadly-relevant questions. Standard deviations are given in parentheses.

Adjusted mean value	Posttest	Closely-relevant questions	Broadly-relevant questions
Teacher-centered non-interactive	4.173 (.783)	2.079 (.597)	2.094 (.377)
Teacher-centered interactive	6.058 (.635)	2.558 (.484)	3.500 (.306)
Student-centered interactive	5.392 (.690)	2.734 (.526)	2.659 (.333)

Finally, we select broadly-relevant questions as the dependent variable. The Levene's coefficient is equal to .061, which is not statistically significant and we can conclude that the variances are homogeneous. Here we obtain a statistically significant difference between the groups [$F(2,41)=4.343, p=.019$]. Since we find statistically significant differences between some groups, we need to conduct post hoc testing. Using the Bonferroni test, a statistically significant difference was found between the non-interactive teacher-centered and the teacher-directed interactive group ($p=0.20$).

Therefore, a statistically significant difference is determined between the teacher-centered non-interactive and the teacher-centered interactive groups in the domain of the broadly-relevant questions. In terms of achievement on the posttest, closely-relevant, and broadly-relevant questions, there are no statistically significant differences among groups, with regard to gender.

By analyzing the pretest, we perceive a poor understanding of the basic concepts of thermodynamics. During the treatment, the lecture "Converting internal energy into work" was processed in a way that the

curriculum was simplified and after that, the experiment was conducted with students. On the theoretical side, we can say that students studied by manipulating existing knowledge to gain more complex knowledge. Since most students did not have a well-developed knowledge to understand the complex material (Converting internal energy into work), it was expected that they would not sufficiently develop the coherent structures of knowledge. Instead, students adopted more fundamental knowledge during the treatment. Statistically speaking, the teacher-centered interactive group achieved a statistically significant difference when it comes to the basic thermodynamic concepts, compared to students taught in a non-interactive teacher-centered approach.

During the student-centered interactive physics teaching, students conduct most of the activities independently, which could be the reason for the poor understanding of the lecture "Converting internal energy into work". Students tried to gain some insight into more complex aspects by using the knowledge they already had, but as they did not have a sufficiently developed knowledge, it was expected that they did not sufficiently understand the new lecture. The student-centered interactive teaching method would probably be more effective if we use more time to implement it, which is in line with the fact that this type of teaching takes more time than the teacher-centered non-interactive teaching method.

CONCLUSION

The goal of this study was to compare the effectiveness of two types of interactive teaching compared to traditional teaching. To accomplish this goal, we conducted research in which we measured students' conceptual understanding of basic thermodynamic concepts in the pretest, and conceptual understanding of thermodynamic concepts (broadly relevant questions) and converting internal energy into work (closed relevant questions) on the posttest. Three eighth-grade classes participated in the study, with one department being taught in the teacher-centered non-interactive, the other as teacher-centered interactive, and the third through student-centered interactive approach.

It is very important for different groups of students in different contexts, to investigate what is the relationship of time spent on what will lead to the best learning of selected topics. In this study, we examined this relationship for eighth grade' students from Bosnia and Herzegovina in the context of learning about converting internal energy into work. The obtained results show that the least effective was the teacher-centered non-interactive approach. These results can be related to the fact that in this approach students are not encouraged to implement higher thought processes, i.e. time is not used effectively to facilitate learning. On the other hand, a student-centered interactive approach has many advantages to foster higher thought processes, but many students have difficulty managing the entire learning process independently, which can lead to cognitive overload. The teacher-centered interactive approach

seems optimal for the age of students who are just beginning to learn physics - this approach seems to offer optimal balance through timely class discussions.

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Summary/Sažetak

U ovoj smo studiji istražili koji nastavni pristup može biti optimalan za olakšavanje učenja o toplinskim pojavama u osnovnoj školi. Konkretno, proveli smo kvazi eksperimentalno istraživanje koje je obuhvatilo 45 učenika osmih razreda podijeljenih u tri skupine. U prvoj skupini (ne-interaktivni pristup usmjeren na nastavnika), nastavnik je održao predavanje sa eksperimentima o pretvaranju toplinske energije u mehanički rad. U drugoj skupini (interaktivni pristup usmjeren na nastavnika) nastavnik je održao isto predavanje temeljeno na eksperimentima, ali je mnogo više komunicirao sa učenicima i potaknuo ih da razmišljaju o predstavljanim eksperimentima. Konačno, u trećoj skupini (interaktivni pristup usmjeren na učenika) učenici su radili u malim skupinama kako bi izveli jednake eksperimente i „otkrili“ odnose koje je nastavnik uveo u prethodne dvije skupine. Rezultati ANCOVA-e pokazali su da su jednaku učinkovitost sva tri nastavna pristupa u razvijanju razumijevanja učenika o toplinskim pojavama. Međutim, detaljnije analize pokazale su da učenici koji su učili korištenjem interaktivnog pristupa usmjerenog na nastavnika značajno nadmašuju svoje vršnjake kada se promatra razumijevanje osnovnih toplinskih pojmova.



Occurrence of the heavy metals and PCBs in Accumulation Lake Modrac

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Abstract: The accumulation Lake Modrac is a particularly important source of drinking water for inhabitants of the Tuzla region and few local settlements. The most significant point sources of organic contaminants in the accumulation Lake Modrac are waste water from households and industry. In this area, most of the settlements have neither sewage systems nor facilities for waste water treatment. Other potential point sources of pollutants are industrial plants. The most prominent are coal mines (Banovići and Đurđevik), metal and wood industry, plant for plastic production, and oil and oil derivatives warehouse. Few previously conducted surveys in the region showed the presence of the persistent organic pollutants and heavy metals in large extent. The objective of this study was to conduct a water quality survey targeting selected inorganic (Cd, Cr, Cu, Hg, Ni, Pb and As) and organic pollutants in the accumulation Lake Modrac in Bosnia and Herzegovina. The content of polychlorinated biphenyls (PCBs) determined with ELISA test, ranging from 3.23 to 6.19 µg/L (sum of 7PCBs). The most abundant metals (analyzed by graphite furnace AAS and mercury analyzer) at all five sampling locations were Pb (6.79-36.58 µg/L); Ni (5.81-10.43 µg/L) and Hg (1.08-6.10 µg/L).

INTRODUCTION

Accumulation Lake Modrac is the largest and most important multi-purpose water resource for water supply of large important industrial capacities in Bosnia and Herzegovina, as well as for public water supply of Tuzla and Lukavac. In addition, main tributaries of accumulation Lake Modrac, River Jala and River Spreča, are also main tributaries (River Spreča) of River Bosna, which is a transboundary river, entering Croatia (tributary to River Sava). Therefore, the Bosna River is a source of pollutants for the Danube, where it eventually drains. The water quality of the accumulation is threatened by the wastewater from communities and industrial facilities (the concentrated polluters) which discharges directly into the accumulation, most of them without any treatment. According to the Coordinating team for protection of accumulation Lake Modrac (Strategy, 2012), the most prominent point sources of pollutants are coal mines (Banovići and Đurđevik), metal and wood industry, plant for plastic production, oil, and oil derivatives warehouse.

All these facilities discharges mainly untreated wastewater into the Lake Modrac or its tributaries. The useful volume of accumulation is limited, primarily due to prolonged deposition of coal dust from coal mines in the basin reservoirs (Strategy, 2012).

The diffuse sources of pollution of the accumulation Lake Modrac with persistent organic pollutants (POPs) are chemical contamination of land used for agricultural production, unregulated landfill for municipal and industrial waste, forestry, transportation, atmospheric deposition of air pollutants, leaching from urban surfaces and industrial areas and others.

In the area of the Bosna River basin, there is a high number of landfills that often contain medical waste (beside municipal and industrial waste), which poses a significant risk and affects the water quality.

Uncontrolled landfills for municipal and other waste are very often the source of fires causing the emission of large quantities of toxic pollutants, including polychlorinated biphenyls (PCB), polychlorinated

dibenzodioxins (PCDD) and polychlorinated dibenzofurans (PCDF).

During the war (1992-1995) in Bosnia and Herzegovina, large amounts of POPs were generated and emitted into the environment because of partial or complete destruction of industrial facilities, military targets, infrastructure, explosions, and uncontrolled fires (Klánová, Kohoutek, Kostrhounová, *et al.*, 2007).

Persistent pollutants are suspected to be a potential problem in major rivers in Bosnia and Herzegovina. However, very little information exists on persistent pollutants contamination as very little analyses have been done (Harman, Grung, Djedjibegovic, *et al.*, 2013; Harman, Grung, Djedjibegovic, *et al.*, 2018).

Studies of environmental quality or water quality of Lake Modrac dated back after the war (latest data are from 1991) and are scarce. In 2016 investigation that was conducted by the Institute for chemical engineering Tuzla (as ordered by public water management company Spreča-Tuzla) showed worsening of all physicochemical parameters of water quality in Lake Modrac comparing to similar investigations done in 2015 (Institute for chemical engineering, 2016). According to legislation in Federation of Bosnia and Herzegovina (FBiH), Lake Modrac should be categorized as class II water, meaning that after physical treatment, chemical treatment, and disinfection this water can be used as drinking water, for aquaculture of Salmonids or for the recreative purposes (swimming or sport) (Directive, 1967).

Results of physicochemical analysis of surface water (JP Spreča dd, laboratory) conducted in 2017 showed that water from the Lake Modrac can be classified as class II, III, IV, or sometimes even non categorized (mouth of River Spreča into a Lake Modrac). Regarding to content of total suspended solids (TSS) it can be categorized as class IV (Reports JP Spreča, 2017). High content of TSS is usually due to contamination with wastewater, or it can point to diffuse sources (*i.e.*, agricultural activities). Calculated chemical oxygen demand/biochemical oxygen demand (COD/BOD₅) ratio was 5.21-8.9 (usually is 1.5-3.0; in extreme cases >5) (Reports JP Spreča, 2017) and is obvious sign of pollution. Inversely, BOD₅/COD ratio calculated from the above presented data from JP Spreča Report is 0.11-0.19. BOD₅/COD ratio 0-0.5 can suggest presence of persistent organic compounds (*i.e.*, coal dust, lignins, tannins, cellulose, synthetic organic compounds) (Lee, Lee, Yu, *et al.*, 2016).

Heavy metals and POPs can pose a significant risk for the environment and human health. So far, great number of studies have linked exposure to POPs with diseases and abnormalities in wildlife species, including fish, birds and mammals. In humans POPs can cause variable adverse health effects, especially, reproductive, neurological, behavioral, immunological and endocrine (Li, Loganath, Chong, *et al.*, 2006; Kumar, Kumar Sarma, Shubham, *et al.*, 2020).

Literature data suggest that all classes of POPs including PCBs and other pollutants like some heavy metals/metalloids, such as Cd, Pb, Hg and As can be classified as endocrine disrupting compounds (EDCs). For example, according to results of previously conducted studies, exposure to low levels of certain

essential or trace metals (*i.e.*, Cu, Cr) can also be related to adverse effects on reproduction in humans (Ashrap, Meeker, Sánchez, *et al.*, 2020; Street, Angelini, Bernasconi *et al.*, 2018; Street, Angelini, Bernasconi, *et al.*, 2018; Nwadiuto Amadi, Nkeiruka Igweze, Ebere Orisakwe, 2017). Special problem is possible additive toxicity as result of exposure to a mixture of toxicants that can act on the same organs or tissues.

Bearing this in mind, the surveillance of specific pollutants, representing the level of anthropogenic impact in the water bodies, is necessary for chemical water body status classification. Among others, preserving and protecting the “good status” for all waters, surface and groundwater, is one of the main goals of Water Framework Directive (WFD) (EC, 2000). Survey and monitoring data are important basis for sound management of the water resources. Therefore, the objective of this study was to conduct a water quality survey targeted on selected inorganic (Cd, Cr, Cu, Hg, Ni, Pb and As) and organic pollutants (PCBs) in the accumulation Lake Modrac in Bosnia and Herzegovina.

EXPERIMENTAL

Sampling

Samples (N=5) analyzed in this work were taken from different locations at accumulation Lake Modrac in August 2018. Sampling sites are presented in Table 1.

Table 1. Sampling locations at accumulation Lake Modrac

Sample	Locations	Coordinates
M1	Mouth of River Turija	44°30'31.6"N 18°27'53.6"E
M2	Trnovčica	44°29'40.2"N 18°30'05.1"E
M3	Mouth of River Spreča	44°28'42.2"N 18°32'30.6"E
M4	Prokosovići	44°30'37.0"N 18°29'01.1"E
M5	Behind the dam of company "Spreča"	44°30'57.0"N 18°30'37.9"E

For the metal analysis, water samples (2 L) were taken in clean plastic bottles, stabilized by adding 2 ml of concentrated nitric acid (67-69 % HNO₃, Optima grade, Fisher Scientific, UK) and stored in refrigerator (4 °C) prior the analysis. All the samples were analyzed in triplicate.

For the analysis of PCBs water samples (1 L) were collected in glass containers, previously washed with methanol (extra pure, Fisher Scientific, UK), and dried in the oven (400 °C) for a couple of hours. Containers were fitted with the foil-lined screw caps. Samples were diluted with the equal volume of methanol to prevent adsorptive losses.

Materials

All used chemicals were of ultra-pure grade. The water (18.2 µScm⁻¹) used for the preparation of reagents and standards was obtained from a laboratory water purifying system (Arium 611, Sartorius Mechatronics, Goettingen, Germany).

All the glassware and utensils used for the metal analysis were washed with the ultra-pure water, after soaking in 10 % HNO₃ for 24 h

All the glassware and utensils used for the analysis of PCBs were washed with ultra-pure water, rinsed with methanol and dried (400 °C) in the oven for a couple of hours.

Sample preparation for heavy metal analysis

For the analysis of heavy metals/metalloids (Pb, Cd, total As, Cu, Cr, Ni), samples were digested in the microwave oven Ethos D 118 (Milestone, Sorisole, Italy) in accordance with standard method (BAS EN 13805:2015) previously described by Omeragić *et al.* (Omeragic, Radosevic, Causevic, *et al.*, 2021).

Analysis of selected heavy metals

Analysis of the selected heavy metals in water samples was performed at the laboratory of the Institute for Public Health of the Federation of Bosnia and Herzegovina. For the determination of Pb, Cd, total As, Cu, Cr and Ni graphite furnace atomic absorption spectrometry (GFAAS) analysis was performed using the atomic absorption spectrometer AA-7000F Dual Atomizer System (Shimadzu, Tokyo, Japan), equipped with self-reversal method (SR) background correction. For the removal of residues from the graphite tube during pyrolysis, argon flow was used. Analysis was done using the standard method for the determination of trace metals using GFAAS (BAS EN ISO 15586:2005). The content of Hg was determined using AMA 254 advanced mercury analyzer (Leco Inc., USA) with the *in-house* method. Briefly, the sample was directly measured (ranged between 0.1 and 0.5 ml) into the pre-cleaned sample boat and placed in the instrument. The Hg concentration was determined using the principle of thermal decomposition, amalgamation, and atomic absorption spectrometry at 254 nm wavelength. A standard solution of Hg (1000 mg/L±2 mg/L, Merck KGaA, Darmstadt, Germany) was diluted with HNO₃ to obtain working solutions for preparation of calibration curves (2.5–30.0 ng and 100–500 ng).

Table 2. Parameters of used analytical methods

Metal	Certified concentration (µg/L)	% RSD	Recovery (%)	LOQ (mg/L)
Cd	6.568	0.014	89.8	0.00002
Cu	22.76	0.004	97.7	0.0014
Pb	19.63	0.010	88.6	0.0011
As	60.45	0.001	96.9	0.0011
Ni	62.41	0.001	95.9	0.0019
Cr	20.40	0.000	87.4	0.0004
Hg	10.00	0.010	92.4	0.0004

* RSD-relative standard deviation; LOQ-limit of quantification

The blanks and standards were analyzed with the same methods as samples. Blanks did not contain detectable amounts of the analyzed metals.

In order to verify the validity of the measurements, standard reference materials, NIST SRM 1643f - Trace Elements in Water (for Cd, Cr, Cu, Ni, Pb and As) and NIST SRM 3133 - Mercury (Hg) Standard Solution were used. The recovery was calculated as the percentage of the certified concentration of a metal in the standard reference material determined during the analytical procedure. Analytical method parameters are presented in Table 2.

Analysis of PCBs

For the determination of PCBs in the analyzed samples Abraxis PCB kit was used. This kit is based on the principles of the enzyme linked immunosorbent assay (ELISA) and is intended to use for the determination of PCBs in water samples.

Samples were prepared for the analysis and analyzed according to a procedure provided by the manufacturer of the kit. In brief, after collecting, samples were diluted and filtered using the glass fiber syringe filter (0.45 µm). Aliquots (50 µL) of samples were transferred to a well of the microtiter plate and mixed with the enzyme conjugate solution (the horseradish peroxidase labeled PCB analog), antibody solution (rabbit anti-PCB), substrate (colour) solution (hydrogen peroxide and 3,3',5,5'-tetramethylbenzidine in organic base) and stop solution (0.5 % sulfuric acid) in consecutive steps following the provided protocol (Abraxis, 2018).

Results of testing (*i.e.*, content of PCBs) are expressed as Aroclor 1254 (µg/L).

As a part of the quality control the kit has included a control solution (approximately 5 µg/L of PCB) that is included in every run and handled in the same way as samples. For the determination of the concentration of PCBs in samples, standard solutions of PCBs (as Aroclor 1254) provided within the kit were used (0, 1, 5, 25, 100, 250 µg/L). Calibration curve is constructed by plotting the logit B/B₀ for each standard versus the natural logarithm of the corresponding PCB concentration.

Logit value is calculated using equation 1:

$$\text{Logit } B/B_0 = \log \frac{\frac{A}{A_0}}{1 - \frac{A}{A_0}} \quad (1)$$

where A₀ is average absorbance value for the negative control (standard concentration 0), and A is average absorbance value for the standard/sample.

RESULTS AND DISCUSSION

The content of metals determined in water samples (µg/L) is presented in Table 3. with side-by-side view of the maximum allowable concentrations (MAC) and target values (TV) for the specific metals proposed in the Council Directive 75/440/EEC concerning the quality required of the surface water intended for the abstraction of drinking water in the Member States (EC, 1975), Decision on characterization of surface and underground waters, reference conditions and parameters for the estimation of the water status and water monitoring in

FBiH (Decision, 2014), EU Directive 2013/39/EU on environmental quality standards in the field of water policy (EC, 2013) and Dutch environmental quality

standards (EQS) for surface water and sediments (Warmer and van Dokkum, 2002).

Table 3. The concentration of metals ($\mu\text{g/L}$) in water samples and maximum allowable concentrations defined by FBiH legislation and EU directives

Sample	Metals ($\mu\text{g/L}$)						
	Pb	Cd	As	Cu	Cr	Ni	Hg
M1	36.58 \pm 0.214	0.283 \pm 0.014	1.386 \pm 0.023	3.117 \pm 0.141	1.255 \pm 0.001	6.920 \pm 0.017	1.075 \pm 0.035
M2	8.573 \pm 0.065	0.024 \pm 0.000	1.474 \pm 0.001	2.267 \pm 0.047	1.129 \pm 0.000	6.920 \pm 0.030	2.495 \pm 0.008
M3	6.790 \pm 0.157	0.031 \pm 0.001	1.892 \pm 0.003	3.202 \pm 0.004	0.859 \pm 0.059	10.43 \pm 0.001	6.098 \pm 0.003
M4	7.532 \pm 0.010	0.064 \pm 0.000	2.349 \pm 0.003	4.175 \pm 0.038	0.558 \pm 0.049	7.900 \pm 0.020	3.893 \pm 0.011
M5	18.16 \pm 0.000	0.066 \pm 0.000	3.518 \pm 0.003	2.724 \pm 0.016	0.453 \pm 0.000	5.813 \pm 0.020	5.113 \pm 0.018
Limits							
75/440/EEC (mg/L)	0.05	0.005	0.05	0.05	0.005	-	0.001
Decision FBiH MAC/EQS ($\mu\text{g/L}$)	7.20 ^a	\leq 0.45-1.50	20.0	1.10-8.80 ^b	10.0	20.0 ^a	0.07
2013/39/EU ($\mu\text{g/L}$)	14.0	0.45-0.60				34	0.07
Dutch EQS MAC ($\mu\text{g/L}$)	220	2.0	32.0	3.80	84.0	6.30	1.20
Dutch EQS TV ($\mu\text{g/L}$)	5.30	0.40	1.30	1.10	2.40	4.10	0.07

Legend: ^a-non applicable MAC-EQS, annual average (AA) is applied; ^b-depending on the hardness of water

The content of all metals except Hg at each of five locations was lower than limits defined in the Council Directive 75/440/EEC. The concentration of Hg recorded at location 1 (1.075 $\mu\text{g/L}$) was slightly higher than the defined limit (1 $\mu\text{g/L}$), while on the other four locations concentrations were two to six times higher than the limit values (Table 3).

Beside Hg the most abundant metals at all locations were Pb and Ni. The highest content of Pb was found at locations 1 and 5 (36.58 and 18.16 $\mu\text{g/L}$, respectively), while the highest concentration of Ni was found in samples from the locations 3 and 4 (10.43 and 7.90 $\mu\text{g/L}$, respectively).

The concentration of Pb, As, Cu and Ni in all samples from all 5 locations were higher than target values defined in Dutch EQS (Table 3). Measured concentration of Cu (4.175 $\mu\text{g/L}$) in sample from the location 4 was higher than MAC defined in Dutch EQS (3.8 $\mu\text{g/L}$), as well as concentrations of Ni at locations 1-4 ($>$ 6.3 $\mu\text{g/L}$).

The concentration of Hg at all 5 locations was slightly higher than MAC defined in Directive 2008/105/EC and target value defined in Dutch EQS (0.07 $\mu\text{g/L}$) and two to five times higher than MAC defined in Dutch EQS (Table 3).

Concentration of Cd at all five locations was well below all aforementioned limits.

Comparing the obtained results to the legislation in FBiH, concentrations of As, Cd, Cu, Cr and Ni were below MAC or annual average, while concentration of

Hg at all five locations was almost two orders of magnitude higher than MAC (0.07 $\mu\text{g/L}$). Concentration of Pb was slightly below annual average value (6.79 $\mu\text{g/L}$ vs 7.2 $\mu\text{g/L}$) only at one location (M3).

Results of our measurement were also compared with the limits defined in Directive on classification of the surface water and water bodies categorization in Republika Srpska (RS) (Directive, 2001). Maximum permitted levels for inorganic substances (metals and metalloids) for the class II and III (equivalent to class II for the Lake Modrac) are presented in Table 4.

Table 4. Maximum permitted levels for inorganic substances (metals) for the water bodies class II and III

Metals (total)	class II ($\mu\text{g/L}$)	class III ($\mu\text{g/L}$)
As	10-20	20-40
Cd	0.05-1.0	1.0-2.0
Cr	5-15	15-30
Cu	5-15	15-50
Ni	0.05-1.0	1.0-2.0
Pb	0.1-0.5	0.5-2.0
Hg	0.1-0.2	0.2-0.5

Registered concentrations of As, Cr, Cu and Cd in all analyzed samples (Table 3) were below permitted limits defined in aforementioned Directive (Table 4), while the concentrations of Pb, Ni and Hg were slightly higher than limits in all analyzed samples.

There is almost no data on contamination of the Lake Modrac with heavy metals and organic pollutants published in the literature. Comparing the obtained results in this study with the study conducted in 2007 on the presence of heavy metals at accumulation Lake Modrac, average concentration of Pb and Cd measured in this study was two to ten times lower, while concentration of Cu was in average two to three times higher (Đonlagić, Odobašić, Bratovčić, 2007).

Overall average contents of Pb, Ni and Cd registered in this study at locations M1 and M5 (27.37 µg/L; 6.37 µg/L and 0.283 µg/L, respectively), were lower than the results of the monitoring of Lake Modrac conducted in 2019 at the same locations (143.88 µg/L Pb; 8.28 µg/L Cd and 43.02 µg/L Ni) (Đozić and Alihodžić, 2019). Average concentrations of As (<0.05 µg/L) and Hg (<0.0001 µg/L) reported by this study were much lower than our results (2.45 µg/L As and 3.09 µg/L Hg).

In comparison to some other lake waters pollution in various countries, including Balkan region, our result are slightly higher than those reported for Lake Kalimanci (Macedonia) and clearly higher than in Skadar Lake (Montenegro), Kralkizi Reservoir, Dickle Reservoir, Batman Reservoir and Isikli Lake (Turkey) for all tested metals (Sibal and Espino, 2018).

Significant positive correlation was found for Pb and Cd concentrations ($r=0.953$, $p=0.012$), and significant negative correlation for As and Cr ($r=-0.911$, $p=0.032$).

Polychlorinated biphenyls (PCBs) in the samples from the accumulation Lake Modrac were determined using commercial ELISA kit. Results of measurement were expressed as content of Aroclor 1254 and sum of 7 indicator PCBs (congeners CB 28, CB 52, CB 101, CB 118, CB 138, CB 153 and CB 180) and presented in Table 5.

Table 5. Concentration of PCBs in analyzed samples from accumulation lake Modrac

Sample	Aroclor 1254 (µg/L)	Sum 7PCBs (µg/L)
M1	10.35±1.29	3.23±0.40
M2	19.84±7.47	6.19±2.33
M3	13.79±4.76	4.30±1.48
M4	17.94±5.80	5.59±1.81
M5	12.91±2.51	4.03±0.78

Aroclor 1254 is one of the several commercial mixtures of PCBs that were extensively used worldwide and still can be measured in environment. Concentrations of PCBs can be presented in few ways depending on the purpose of the analysis and method used. Commercial kits based on ELISA are recognized by Unites States Environmental Protection Agency (US EPA) for the screening purposes and often are used for the detection of presence of PCBs in the water or sediment.

Result of measurements are often expressed as Aroclor content in risk assessment studies, while in most ecotoxicology studies it is important to determine not only total concentration of PCBs, but also congener profile. In that case mostly low chlorinated and high chlorinated congeners (28, 52, 101, 118, 138, 153 and

180) or so called “7 Dutch” or 7PCBs are determined. For that reason, we have recalculated results of the measurements from this study, that were originally expressed as content of Aroclor 1254, to the content of 7PCBs, presuming that content of 7PCBs in the commercial Aroclor 1254 mixture is 31.2 %. According to Risso *et al.* (2016), it is possible to establish quantitative relationship between any single Aroclor mixture and the sum concentration of the PCB congeners (Risso, Magherini, Ottonelli, *et al.*, 2016).

Presented results exceed the limit values of 0.014 µg/L for the class III water established by ECE (Economic Commission for Europe) Standard Statistical Classification of Surface Freshwater Quality for the Maintenance of Aquatic Life (UN/ECE, 1992). Previously mentioned, Directive on classification of the surface water and water bodies categorization in Republika Srpska (Directive, 2001) set limit for the PCBs for class II water at 0.02-0.04 µg/L (expressed as sum of PCBs). Concentrations of PCBs at all five locations exceeded this limit. The total concentration of PCBs (ΣPCBs) determined in the Yangtze River, ranged in 0.04–11 ng/L, and was considered low to moderate polluted (Cui, Dong, Huang, *et al.*, 2020). Comparing to this, water in Lake Modrac can be considered as highly polluted. There is no other data on presence of the organic pollutants in the Lake Modrac, so we could not compare our results with similar studies. Additional surveys are urgently needed in order to evaluate ecological status of the accumulation Lake Modrac. Correlations between metals and PCBs concentrations were not statistically significant.

CONCLUSION

This is the first survey on levels of organic pollutants namely polychlorinated biphenyls (PCBs) in the accumulation Lake Modrac. The content of PCBs determined in this study exceeded the limit values established by regulatory bodies in EU and in BiH. Comparing values to test results obtained in other countries, water in the accumulation Lake Modrac can be considered as highly polluted. Regarding the content of heavy metals, the most abundant metals at all five sampling locations were Pb, Ni and Hg. Since the results from this study were higher than those reported from other authors for lakes in the region, it can be concluded that Lake Modrac evidently reflects some anthropogenic sources of pollution (possibly coal mining, industry, agricultural and domestic sources). Although, some previous surveys on presence of the heavy metals in Lake Modrac were conducted, results of this study are valuable addition to the existing data enabling the analysis of temporal trend in this area of BiH. Results of this study pointed out necessity of conducting more detailed monitoring of the ecological status of the accumulation Lake Modrac. This especially because of the recorded high content of the organic pollutants, that can pose significant health risk for humans.

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Summary/Sažetak

Akumulaciono jezero Modrac je od posebnog značaja kao izvor pitke vode za stanovnike Tuzle i nekoliko okolnih naselja. Najznačajniji izvor kontaminacije akumulacije Modrac organskim polutantima predstavljaju otpadne vode iz domaćinstava i industrije. U ovoj regiji, većina naselja nema adekvatne sisteme odvoda otpadnih voda niti postoje postrojenja za njihov tretman. Ostali potencijalni izvori polutanata su industrijska postrojenja od kojih su najznačajniji rudnici (Banovići, Đurđevik), metalna i drvena industrija, fabrike za proizvodnju plastike, te skladišta nafte i naftnih derivata. Nekoliko prethodno provedenih istraživanja u regionu ukazalo je na značajno prisustvo postojanih organskih polutanata i teških metala, pa je cilj ove studije bio da se provede ispitivanje prisustva odabranih anorganskih (Cd, Cr, Cu, Hg, Ni, Pb i As) i organskih polutanata u vodi akumulacionog jezera Modrac, BiH. Sadržaj polihloriranih bifenila (PCB) određen ELISA testom kretao se u rasponu od 3,23-6,19 ppb (suma 7PCB), dok su najveće koncentracije metala (određene primjenom atomske apsorpcione spektrometrije - grafitne tehnike i živinim analizatorom) na svih pet lokacija uzorkovanja registrovane za olovo (6,79-36,58 µg/l), nikl (5,81-10,43 µg/l) i živu (1,08-6,10 µg/l).

Smoking effect on the cadmium and zinc concentration in smokers and nonsmokers

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Abstract: Studies have shown that cigarette smoking affects the accumulation of some heavy metals in certain tissues and metabolism of essential elements. The aim of the study was to determine the differences in the concentrations of cadmium in the blood and urine and zinc in the urine of smokers and ex-smokers in relation to non-smokers, and to determine the possible influence of cadmium concentration on zinc excretion as an essential element. The study included 106 subjects. Subjects were regular smokers (n=51), ex-smokers (n=38) and non-smokers (n=17). Atomic absorption spectrophotometry (AAS) with an electrothermal atomizer was used to determine cadmium. Zinc was determined by AAS with a flame atomizer. There was a significant difference in the values of cadmium in the blood between the groups: smokers and non-smokers ($p < 0.001$), smokers and ex-smokers ($p < 0.001$), and between ex-smokers and non-smokers ($p = 0.045$). There is a significant positive and strong correlation in the level of zinc and cadmium in urine per gram of creatinine, and as the level of cadmium increases, the level of zinc also increases ($\rho = 0.781$; $p = 0.001$). The data indicate that cigarette smoking has been shown to be a factor that can increase cadmium levels to an extent that will significantly increase zinc excretion, or its increased loss.

INTRODUCTION

Cigarette smoking, which produces chemical compounds that have a very detrimental effect on the health of smokers and people in their vicinity, is a widespread bad habit among people of all ages. Harmful effects on the human body are based on the fact that cigarette smoke, in addition to nicotine, contains more than 5300 other ingredients, of which more than 70 are carcinogenic (Talhout, Schulz, Florek, *et al.* 2011). Heavy metals, such as cadmium, mercury, chromium, lead, antimony, nickel, and zinc, are important categories of carcinogenic ingredients in tobacco smoke. After entering the body, toxic metals have a long biological lifespan, which affects the accumulation of some heavy metals in certain tissues and the metabolism of essential elements, with changes in their values in biological material, primarily blood, urine, hair, and nails (Alrobaian, Arida, 2019).

The role of these metals in the pathophysiology of diseases caused by cigarette smoking is still poorly understood. New data suggest that changing the homeostasis of these metals in the human body by cigarettes smoking plays a crucial role in the development of several diseases, primarily respiratory and cardiovascular, and malignant cell alteration (Bernhard, Rossmann, Wick, 2005). Cadmium as an element has no physiological or biological role in the human body. The most common pathways when cadmium enters the body are inhalation and intake of food or water that contains large amounts of cadmium. Cadmium poisoning rarely causes death and leads to cancer and toxicity of organs such as skeletal, urinary, reproductive, cardiovascular, nervous, and respiratory systems. Most commonly it causes nausea and vomiting. The rest of the cadmium accumulates well in the body, and if metallothionein does not remove it from the body

in a short period, it can remain in humans for up to several decades. The decay time of cadmium in the kidneys is 6 to 38 years, while in the liver, it is 9 to 18 years, and the reason is that cadmium has no function in the body, and the body does not consume it (Prashanth, Kattapagari, Chitturi, *et al.* 2015).

The effect of cadmium on the body is to increase the activity of proinflammatory cytokines and causes diseases in many tissues, including the lungs and kidneys (Alkan, Cakmak, Karis, 2014). In addition, cadmium negatively affects the process of DNA replication and reparation and increases the possibility of error, *i.e.*, it acts as a mutagen. With chronic exposure to cadmium, this mutagenic effect multiplies and becomes carcinogenic, which often cannot be corrected by a subsequent increase in the presence of zinc (Lützen, Liberti, Rasmussen, 2004). Previous studies have shown that smokers have higher cadmium concentrations in urine, blood, hair, and tissues than non-smokers. While urinary cadmium concentrations correlate with chronic exposure to tobacco smoke, blood cadmium concentrations provide information on recent cadmium exposure (Richter, Faroon, Pappas, 2017).

Zinc is an essential element necessary for the proper growth, development, and functioning of the human body. This mineral is found in almost every phase of activation of antioxidant enzymes and is necessary for participation in important biological functions. It has a high antioxidant potential and is an integral part of 300 enzymes, as cofactor it participates in the synthesis and breakdown of carbohydrates, lipids, proteins, and nucleic acids. The human body contains 2-3 grams of zinc, and it is after iron the second trace element in the human body (Prashanth, Kattapagari, Chitturi, 2015). Zinc is essential for the creation, development, and maintenance of the immune system involved in the healing wounds, injuries, and burns. It needs the conversion of vitamin A in its active form to play an important role in the production of the hormone testosterone and the balancing insulin in the human body. With its antioxidant properties, zinc participates in the body's defense against free and harmful radicals. It is also needed for a normal sense of taste and smell and normal growth and development during pregnancy, childhood, and adolescence (Osredkar, Sustar, 2011). Less than 0.5% of the total body amount of zinc is found in plasma, while most is stored mainly in muscles and bones (approximately 90%) and the liver, teeth, hair, skin, leukocytes, testes, and others. Most of the plasma zinc binds up to proteins, about 50% to albumins (Al-Assaf, 2010). It is known that even the slightest change in zinc concentration can lead to the development and progression of many mild and severe acute and chronic diseases. Zinc deficiency can negatively affect the processes of genetic mutation and carcinogenesis and increase oxidative stress (Proudfoot, McPherson, Kolb, 2011; Dhawan, Chadha, 2010).

Data on the concentration of zinc in tobacco smoke are sparse and inconsistent. The content of cadmium in the topsoil (0-10 cm) varied from 0.01 to 16.9 µg/g. The concentrations of cadmium in cigarettes range from 0.5 to 3.5 µg/g, with a mean level of 1.7 µg/g. These are very high levels compared to those in food that are

normally below 0.05 µg/g. Zinc concentration, analysed in 12 American cigarette brands, range from 16.8 to 30.5 µg/g (Chiba, Masironi, 1992). During combustion, less zinc is generated from tobacco into smoke than cadmium, indicating a negligible zinc concentration compared to cadmium in common cigarette smoke particles (Fresquez, Pappas, Watson, 2013).

The high positive correlation or interdependence between the values of cadmium and zinc in urine can be explained by the metabolic antagonism of cadmium and zinc, which arises on the principle of competition for the same carrier. In this case, it is metallothionein, a low molecular weight cytoplasmic protein for which cadmium and zinc compete for cystine sites (Goyer, 1997). This competition goes to the account of zinc if the value of cadmium is high, which explains this strong, cross-correlation and which causes an increase in the loss of zinc. Cadmium bound to metallothionein in renal and liver, epithelial cells, is not toxic, but cadmium bound to plasma metallothionein is toxic to the renal tubules as it is excreted in the urine, as confirmed by Chan and Cherian (1993) in an animal model.

The aim of the study was to determine the difference in the values of cadmium and zinc in the biological material of smokers in relation to ex-smokers and non-smokers and to examine the interdependence of cadmium and zinc levels in smokers, ex-smokers, and non-smokers.

EXPERIMENTAL

Subjects

The research included 108 participants living in Sarajevo Canton., According to the inclusion criteria, the participants were classified into three groups. The first group consists of regular smokers ($n = 51$), the second group consists of ex-smokers ($n = 38$), and the third group of participants who have never consumed tobacco ($n = 17$). During the study, two subjects were excluded due to extremely high levels of cadmium from the first and second group. The smoking experience of ex-smokers was 30.94 ± 18.46 pack-year, while for current smokers, this experience was 32.78 ± 17.70 pack-year.

All participants had a detailed medical interview. Individual questionnaires included data on gender, age, smoking status, height and weight, and body mass index (BMI), eating habits (consumption of fish, meat, alcohol, and coffee), existence and a number of amalgam dental fillings, type of occupation (office or more physical work), education, the presence of an acute illness or a chronic illness. For smokers, data on the length of smoking experience with average daily smoked cigarettes were taken, and for the group of former smokers, data on the length of the smoking experience, average daily smoked cigarettes, and the length of non-tobacco consumption.

Criteria for inclusion in the study were: participants who are not occupationally exposed to heavy metals, participants who do not take trace element supplements as a dietary supplement, voluntary consent to participate in research, participants who do not take other intoxicants, permanent residence in Canton Sarajevo for at least 20 years, and consumption at least 10 cigarettes

daily for smoking participants. Exclusion criteria were: consumption of less than 10 cigarettes per day in a group of smokers, consumption of less than 10 cigarettes by ex-smokers during smoking, occupational exposure to heavy metals, data on drug use, taking zinc supplements as dietary ones, existence of metal implants, residence in Sarajevo Canton for less than 20 years. The study was conducted with the approval of the Ethics Committee of the Faculty of Medicine, University of Sarajevo (1324-AS/11) in accordance with the recommendations contained in the Declaration of Helsinki on Biomedical Research Involving Human Subjects as revised in 2013.

Sample analysis

After a medical interview and physical examination, the subjects had their blood taken for laboratory tests by puncturing the cubital vein. Serum was extracted from blood samples after coagulation and centrifugation for 10 minutes at 4000 rpm and stored until the required results were obtained. A blood sample (10 cm³) was taken between 8.00 and 9.30 am using a vacutainer system. The vacutainer system consists of a plastic cylinder, a disposable needle, and a vacuum tube. Contact with the needle, vacutainer walls, and stopper was avoided during blood collection. The blood vacutainer is clogged with care to avoid contamination. The blood sample was analyzed immediately or left for up to 2 days at + 4°C. If the analysis was performed over several days, then the samples were stored at -20°C. Before analysis, the blood was stirred for half an hour on a ROLLER. EU-certified blood (serum) BCR194L, BCR194N, BCR 194H was used as a control. For the first sample, 20 cm³ of urine was taken from the patient once in a plastic container made of chemically inert material. The sample was labeled and left at -20°C.

Determination of heavy metal concentration in a sample

Determination of heavy metal content was performed in the Laboratory for the Toxicology of the Public Institution Institute for Occupational Medicine of Sarajevo Canton and the Institute for Public Health of Sarajevo Canton by atomic absorption spectrophotometry (AAS). This is the most commonly used analytical technique for determining metals in samples. The metals being analyzed absorb radiation of a certain wavelength, whereby excitation occurs at the level of electrons and their transition to higher energy levels. Radiation from an external source of energy corresponds to the difference between the ground and excited states of atoms or ions. For the same electron transition, the energy of the emitted photon is equivalent to the energy of the absorbed, that is, the wavelength of the emitted is equal to the wavelength of the absorbed radiation. The advantage of AAS is the speed of analysis, simplicity, relatively low cost of instruments, and favorable sensitivity and selectivity for many elements. Limitations are the difficulty in determining multiple elements at the same time because each element requires a corresponding hollow cathode lamp (Jignesh, Vineeta, Abhay, 2012).

Determination of cadmium levels in blood and urine

Cadmium levels were determined by Graphite Furnace Atomic Absorption Spectroscopy (GFAAS). The main instruments and devices used in the measurement were:

- Atomic absorption spectrophotometer Perkin Elmer Model, USA, AAnalyst 600. THGA technique (thermally heated graphite cuvette),
- Autosampler model AS-800;
- WinLab 32 software.

Other instruments used:

- Nahita centrifuge, model 2690
- Centrifuge EBA 20 (HettichzentrifugenTuttlingen, Germany)
- Mixer Vortex - 2 - Genie, Scientific Industries BOHEMIA N.Y. 11716 USA Laboratory Equipment Model No. G-560E
- Demineralized water machine Sartorius Arium 63316, Sartorius Arium 611UV, Sartorius Tank 613 APV31 30 L, 10 bar, 90°C.

Preparation of blood and urine for the cadmium level measurement

Due to its low affinity for the measured heavy metals, K2-EDTA (Ethylenediaminetetraacetic Acid) was used as a blood anticoagulant. Before determining the cadmium levels in the sample, it was necessary to create a calibration curve. A pool of blood and a pool of urine were added to all solutions for the calibration curve when determining cadmium in whole blood and urine. All solutions were prepared in deionized water of very high purity with 0.2% HNO₃. Calibration is performed by a four-point instrument from two standard solutions 1 µg/L and 5 µg/L. Calibration points (standards) were: 0.2 µg/L, 0.5 µg/L, 1 µg/L and 5 g/L. Each point was read three times, which was the basis for the mean value calculation. The minimum number of points on the calibration curve was four, and the correlation coefficient must be ≥ 0.995. Standards have been developed whose values cover the possible range of cadmium levels in the samples. The sample amount is 10 µl. HNO₃ precipitated blood proteins. An aliquot of the sample was injected into an AAS graphite cuvette, and the cadmium absorbance was measured at 228.8 nm. Cadmium pyrolysis (thermal decomposition) takes place at 700°C and atomization at 1550°C. The recommended atomization time was 3 seconds (max. 10 sec.). The cadmium level is calculated using a calibration curve made by the standard addition of cadmium to the blood. They were read in three measurements from which the mean value was taken.

Method for determining zinc in urine

The level of zinc in the urine was determined by atomic absorption spectrophotometry with a flame atomizer. The measurement was performed on a Varian device, model: SpectrAA 110 Atomic Absorption Spectrometer. The zinc standard used in the analysis was 1 mg/ml, manufactured by Panreac. The principle of this method is to determine the concentrations of zinc in different samples by measuring the absorbance of the sample.

When the sample burns, an atomization process occurs, and the resulting zinc metal atoms are exposed to line radiation of a specific wavelength (213.9 nm). The photodetector detects the change in radiation intensity, and the instrument software translates the radiation intensity into the metal concentration in the sample. Prior to each use, the instrument should be calibrated with a pre-prepared concentration series of standard zinc solutions. After calibration of the instrument, it is possible to determine the zinc in the samples. The samples are homogenized and aspirated using a plastic tube in such a way that the tube is immersed in the sample solution where the device automatically sucks up the solution continuously. Since the device allows multiple consecutive measurements and analysis of the same homogeneous sample quickly, based on a pre-set sample, three measurements are performed, and the average value is calculated.

Adjustment of measurements and standards in determining the value of zinc:

- Wavelength: 213.9 nm.
- Separation wavelength: 1.0 nm
- Lamp current: 5.0 mA
- Number of replica samples and standards: 3
- Time measurement: 5s
- Flame type: air / acetylene
- Air flow rate: 3.5 L / min.
- Acetylene flow rate: 1.5 L / min.

The sample is prepared for measurement by taking a 400 μL urine sample in a glass tube and adding 1600 μL of purified water and stirring. The blank is made of ultrapure water that does not contain a sample. The flame atomizer needs to be purified with 2% HNO_3 , and between individual measurements, ultrapure water is used for rinsing. After preparation and homogenization, the samples are measured. The device allows multiple consecutive measurements of the same sample quickly, which contributes to greater measurement accuracy. Zinc concentrations in urine samples were calculated using a calibration curve and expressed in mg/L .

Other analyzes

Each participant was determined for a complete blood count and the concentration of creatinine in the urine. The concentration of creatinine in urine is the best indicator of urine concentration, and its determination was necessary to express the concentration of heavy metals so that the concentration of heavy metal is expressed in micrograms per gram of creatinine in urine ($\mu\text{g/g}$ creatinine in urine - $\mu\text{g/g}$ Ucr). Thus, the concentrations of heavy metals can be compared with each other regardless of the concentration of urine, which is an excellent advantage over the volume expression of heavy metals in $\mu\text{g/L}$ of urine. This is a convenient method when the metal concentration is not determined in 24-hour urine.

Statistical analysis

For statistical data processing *Microsoft Excel 2013* and *IBM SPSS Statistics 20* were used. The results are presented as the median, with the first and third quartile values (Q1 and Q3) or as an arithmetic mean with the corresponding standard deviation, depending on the data

distribution. The values were compared using Student t-test or non-parametric test (Man Whitney test). The Kruskal-Wallis test or analysis of variance (ANOVA) was used to compare the values of more than two groups, depending on the data distribution. The Spearman's coefficient correlation analysis was used to correlate data. A significance level of 5% was used to determine statistical differences.

RESULTS AND DISCUSSION

The basic characteristics of respondents, smokers, non-smokers and ex-smokers are shown in Table 1. These data represent characteristics of age, body mass index (BMI), gender, type of job (intellectual, or physical), and the presence of a chronic disease.

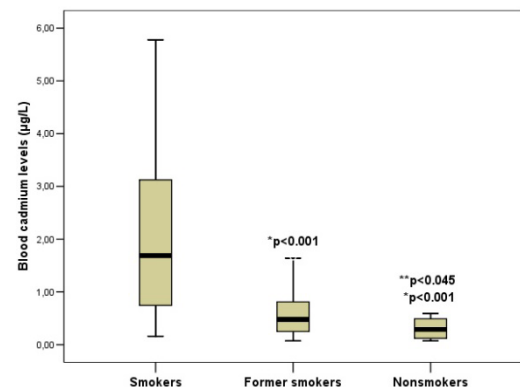


Figure 1: Concentration of cadmium in the blood
*smokers in comparison to non-smokers and ex-smokers **ex-smokers in comparison to non-smokers

The analysis of cadmium in the respondent's blood (Figure 1) showed the highest level in smokers with a median of 1.74 $\mu\text{g/L}$ (0.74 $\mu\text{g/L}$; 3.19 $\mu\text{g/L}$), followed by ex-smokers 0.44 $\mu\text{g/L}$ (0.22 $\mu\text{g/L}$; 0.64 $\mu\text{g/L}$), while in non-smokers this value was 0.29 $\mu\text{g/L}$ (0.10 $\mu\text{g/L}$; 0.50 $\mu\text{g/L}$).

There was a difference in the values of cadmium in the blood between the groups: smokers and non-smokers ($p < 0.001$), smokers and ex-smokers ($p < 0.001$), and between ex-smokers and non-smokers ($p = 0.045$).

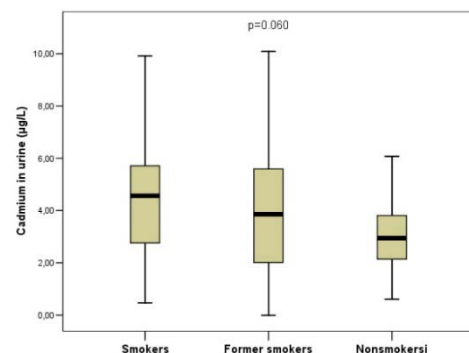


Figure 2: Cadmium volume values in urine

The volume values of cadmium in the urine of the respondents (Figure 2) were found to be at the highest levels in smokers with a median of 4.56 $\mu\text{g/L}$ (2.68 $\mu\text{g/L}$; 5.80 $\mu\text{g/L}$), followed by ex-smokers 4.22 $\mu\text{g/L}$ (2.01 $\mu\text{g/L}$; 5.79 $\mu\text{g/L}$), while in non-smokers this value was 2.94 $\mu\text{g/L}$ (1.77 $\mu\text{g/L}$; 3.90 $\mu\text{g/L}$).

Table 1: Patients characteristics

		Smokers	Former smokers	Non-smokers
	Age (years)	47.80 ± 5.68	50,57 ± 6.16	48,88 ± 5.60
	BMI (kg/m ²)	27.2 ± 4.6	28.6 ± 4.3	27.2 ± 4.6
Gender	Male (%)	47.1	55.3	41.2
	Female (%)	52.9	44.7	58.8
Occupation	Intellectual work (%)	51.0	63.0	59.0
	Physical work (%)	49.0	37.0	41.0
Health status	No concomitant disease (%)	49.0	47.4	94.1
	Chronic diseases (%)	45.1	44.7	5.9
Smoking experience (pack-year)		32.78 ± 17.70	30.94 ± 18.46	-

*For age, BMI and smoking experience period data expressed in mean±SD

The differences between the tested groups are indicative, but not significant (p=0.060).

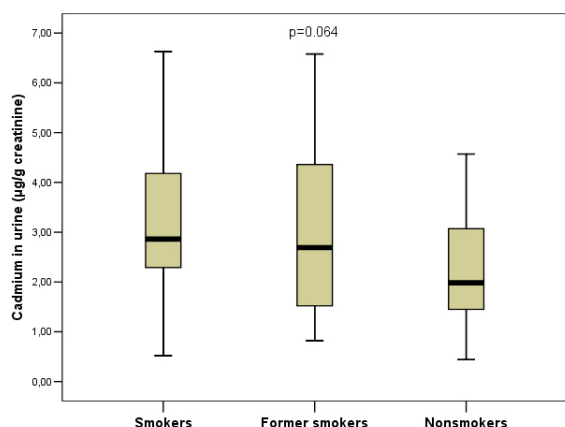


Figure 3: Cadmium levels in urine per gram of creatinine

Cadmium values per gram of creatinine in urine (Figure 3) indicate that the highest level was found in smokers with a median of 2.86 µg/L (2.22 µg/L; 4.24 µg/L), followed by ex-smokers 2.56 µg/L, (1.42 µg/L; 4.36 µg/L), while in non-smokers this value was 1.98 µg/L (1.43 µg/L; 3.24 µg/L).

Differences between the examined groups did exist, but were not significant (p=0.064).

Volume zinc concentrations and zinc concentrations per gram of creatinine in urine did not show significant differences between the tested groups (p=0.909; p=0.877) (Table 2).

In the group of smokers, a significant positive correlation was found between the concentration of cadmium in urine per gram of creatinine (µg/g creatinine) and the duration of smoking (rho=0.323; p<0.05). In the same group, a significant positive correlation was found between the concentration of cadmium in the blood with the number of pack-year (rho=0.293; p<0.05) as well as the concentration of cadmium in urine per gram of creatinine with the number of pack-year (rho=0.300; p<0, 05) (Table 3) A

strong positive correlation was also found between the concentration of cadmium in the blood and the number of cigarettes smoked per day (rho=0.485; p<0.01) (Table 3).

Table 2: Median values and 25 and 75 percentiles for level of cadmium in blood and urine and zinc in urine

Metal/sample type	Groups	Percentiles		
		25 th	Media n	75 th
Cadmium/Blood (µg/L)	Smokers	0.75	1.74	3.20
	Ex-smokers	0.22	0.44	0.64
	Non-smokers	0.11	0.29	0.50
Cadmium/Urine (µg/L)	Smokers	2.68	4.56	5.81
	Ex-smokers	2.01	4.22	5.79
	Non-smokers	1.77	2.94	3.91
Cadmium/Urine Creatinine (µg/g)	Smokers	2.23	2.86	4.24
	Ex-smokers	1.42	2.56	4.36
	Non-smokers	1.44	1.98	3.25
Zn/Urine (µg/L)	Smokers	189.8	375.5	579.3
	Ex-smokers	238.0	353.5	525.5
	Non-smokers	254.0	333.0	532.5
Zn/Urine Creatinine (µg/g)	Smokers	196.6	249.5	370.3
	Ex-smokers	171.6	254.2	389.3
	Non-smokers	222.8	295.9	347.1

Correlations between cadmium levels in blood with smoking duration, cadmium levels in urine with smoking duration, number of pack-year, number of cigarettes per

day, cadmium per gram of creatinine values in urine with number of cigarettes per day, zinc levels in urine with smoking duration, number of pack-year, number of cigarettes per day, zinc per gram of creatinine values in

urine with smoking duration, number of pack-year, number of cigarettes per day did not show statistical significance (Table 3).

Table 3: Correlations between the concentration of cadmium in blood and urine, zinc in urine with years of smoking duration, number of pack-year and daily smoked cigarettes in a group of smokers

Variable	Smoking duration	Number of pack- year	No. of cigarettes per day
Cadmium Blood	Rho= 0.022	Rho= 0.293*	Rho= 0.485**
Cadmium Urine	Rho= 0.072	Rho= 0.144	Rho= 0.093
Cadmium Urine/Urine Creatinine	Rho= 0.323*	Rho= 0.300*	Rho= 0.159
Zinc Urine	Rho= -0.172	Rho= -0.074	Rho= 0.014
Zinc Urine/Urine Creatinine	Rho= -0.051	Rho= 0.015	Rho= 0.090

Level of significance:

*p<0.05

**p<0.01

There is a statistically significant positive and strong correlation in the level of zinc and cadmium in urine per gram of creatinine, and as the level of cadmium

increases, the level of zinc also increases (rho=0.781; p=0.001)

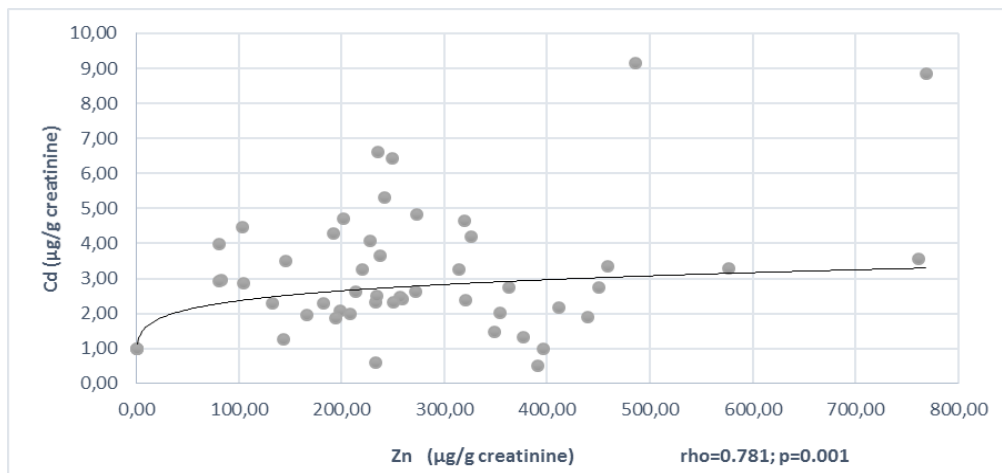


Figure 4: Correlation of zinc and cadmium levels in the urine of smokers per gram of creatinine

Previous studies have shown that cadmium absorption is most effective by the respiratory system (Nordberg, Kjellstrom, Nordberg, 1985). So perennial smoking represents a chronic exposure to low values of cadmium. Olsson, Bensryd, Lundhet *et al.* (2002) conducted a study on 105 participants, of whom 26 participants were ex-smokers and 79 who had never consumed tobacco. They determined the level of cadmium in blood and urine of all subjects. They found higher blood cadmium values in ex-smokers, compared to non-smokers. Our study also found a statistically significant difference in cadmium values between ex-smokers and non-smokers (p=0.045). Since the half-life of cadmium in the blood is 2-3 months, we expected that the values will not be higher in ex-smokers compared to non-smokers, because according to some studies, the level of cadmium in the blood is a measure of short-term exposure (Birgisdottir, Knutsen, Haugen, *et al.*, 2013). It is likely that the level of cadmium in the blood is a reflection not only of the short-term load of the body with cadmium, but also a consequence of long-term accumulation in the kidneys and liver (50-75% of the total cadmium content in the body), from where cadmium partially re-enters the blood, as shown in study conducted by Hoffmann, Krause, and Seifert (2001). Therefore, this increase in

the levels of cadmium in blood of ex-smokers compared to non-smokers, and after several years of smoking cessation, could be taken into account in the biomonitoring cadmium exposure.

Our study found a statistically significant difference cadmium levels in blood between smokers and non-smokers (p<0.001). These results are consistent with the results of Anetor, Ajose, Anetor, *et al.* (2008) who conducted a study on 55 healthy smokers and 41 healthy non-smokers. They determined the level of cadmium and zinc in the serum, and assessed the health risks of the examined groups, primarily the risk of prostate cancer. The level of cadmium, in the aforementioned study by Anetor, *et al.* (2008), in the group of smokers was significantly higher compared to non-smokers. The same authors found a positive correlation between smoking history and blood cadmium concentration (p<0.05). Such large differences in the values of cadmium in the blood of smokers and non-smokers support the importance of respiratory absorption, as the most efficient form of intake of this heavy metal, which was confirmed by the studies by Elinder, Kjellstrom, Lind, *et al.* (1983).

Our study, in accordance with the described study, found a statistically significant difference between the measured values of cadmium in the blood between

smokers and ex-smokers ($p < 0.001$). In addition, we found a positive correlation between the concentration of cadmium in the blood and smoking duration of in the group of smokers, so that long-term smokers had a higher concentration of cadmium in the blood. Smoking duration is expressed by the number of packs-year of cigarettes. We also found a positive correlation between the concentration of cadmium in the blood of smokers and the number of cigarettes smoked per day, which is consistent with previous study conducted by Anetor, Ajose, Anetoret *et al.* (2008).

The results of the study we conducted are in accordance with the results of the study conducted by Massadeh, Gharibeh, Omari, *et al.* (2010) on a sample of 79 participants. These authors also found a positive correlation between blood cadmium levels and smoking duration as well as the number of cigarettes consumed per day. However, these authors, like the previous Anetor, *et al.*, did not include ex-smokers in their study. The results of the presented study on the level of cadmium in the blood are also consistent with the results of research by Birgisdottir, Knutsen, Haugen, *et al.* (2013) and Afridi, Kazi, Kazi, *et al.* (2011). Blood cadmium values were higher in subjects from all three groups (smokers, ex-smokers, non-smokers) with the chronic disease (chronic obstructive pulmonary disease-COPD, cardiovascular disease-CVD and malignancies; $p < 0.05$). These results are confirmed by the studies of Anetoret *et al.* (2008), and Afridiet *et al.* (2010).

In our study, in addition to the volume value of cadmium levels in urine, we also determined its level expressed per gram of creatinine in urine ($\mu\text{g/g Ucr}$). The concentration of creatinine in urine is the best indicator of urine concentration and its determination is necessary in order to express the levels of heavy metals in this medium. This enables a more objective comparison of the values of heavy metals regardless of the concentration of urine, which is an advantage over the volume expression of the values of heavy metals, or in $\mu\text{g/L}$ of urine. The values of cadmium in urine, expressed by this method, in our study were the highest in smokers, but without statistical significance ($p = 0.06$). We also found a positive correlation between urine cadmium levels per gram of creatinine and smoking duration (number of pack-year), as well as the number of cigarettes consumed per day ($p < 0.05$), which is in accordance with the studies of Bamgbose, Opeolu, Bamgbose (2007), and Olsson *et al.* (2002).

The results of our study are consistent with the results of a study by Benemann, Bromen, Lehmann, *et al.* (2004) ($n = 4551$) conducted as part of heavy metal biomonitoring in the general population. This study found that a group of smokers with a smoking volume of 25 pack-year had an increase in urine cadmium levels of 45.5% expressed in $\mu\text{g/g Ucr}$. One of the possible causes of the increase in the amount of cadmium in urine among ex-smokers compared to non-smokers, and if it does not reach statistical significance in our study ($p = 0.06$) is the biokinetics of cadmium, because this heavy metal is excreted by the kidneys upon release

from its depots in the body. If we take into account that the half-life of elimination of cadmium from the body is long (20-30 years) and that the main route of elimination is through the kidneys and urine, it probably takes a longer period of time than the cessation of exposure, for the difference in concentrations between the group of ex-smokers and non-smokers to be insignificant, which we found in the study of Olson *et al.* (2002). A study conducted by Mutti, Corradi, Goldoni, *et al.* (2006) showed that cadmium and lead were still in measurable values in exhaled air condensation, years after smoking cessation.

In our study, the values of zinc in urine were determined. The volume values of zinc in urine and values of zinc in urine per gram of creatinine did not differ statistically significantly between the examined groups ($p = 0.909$; $p = 0.877$). However, there is a significant positive correlation between urine cadmium and zinc values expressed per gram of creatinine. As the level of cadmium increases, the level of zinc also increases ($\rho = 0.781$; $p = 0.001$). Such a high degree of correlation indicates that the increase in the content of cadmium in the body, or in its depots, which in turn increases the intensity of zinc loss by increased excretion, suggests increased loss of this essential element rather than its increased bioavailability as shown by studies by Afridi, Kazi, Kazi *et al.* (2010), and Lin, Caffrey, Chang *et al.* (2010).

Considering that zinc acts in the process of DNA replication, its stabilization, and in the processes of DNA repair, as an integral and essential part of enzyme systems involved in these processes (Proudfoot *et al.*, 2011), the effect of cadmium on its metabolism is even more significant.

In addition, zinc reduces oxidative stress and exhibits antioxidant activity. Zinc deficiency can adversely affect the processes of genetic mutation and carcinogenesis, and increase oxidative stress, as shown in studies conducted by Proudfoot, McPherson, Kolbet *et al.* (2011), Dhawan, Chadha (2010) and Bertini, Decaria, Rosato, (2010). On the other hand, cadmium, as a zinc antagonist, negatively affects the process of DNA replication and repair and acts as a mutagen. In chronic exposure to cadmium, this mutagenic effect multiplies and becomes carcinogenic, which often cannot be partially canceled by a subsequent increase in the presence of zinc [Clark and Kunkel (2004), Jin, Clark, Sleboset *et al.* (2003), Waisberg, Joseph, Haleet *et al.* (2003), Lützen, Liberti, Rasmussen (2004)].

CONCLUSION

The presence of a large number of harmful chemical elements in tobacco smoke such as cadmium has consequences on biological indicators, the so-called biomarkers of exposure. Biomarkers of cadmium exposure in blood and urine show significant shifts, especially in the blood of active smokers. This study also found a significant difference in cadmium values between ex-smokers and non-smokers. Therefore, this

increase in the level of cadmium in the blood of ex-smokers compared to non-smokers, and after several years of smoking cessation, could be taken into account in the biomonitoring of cadmium exposure. There is a significant positive correlation between cadmium and zinc values in urine expressed per gram of creatinine. Such a high degree of correlation indicates that the increase in the content of cadmium in the body, or in its depots, which in turn increases the intensity of zinc loss by increased excretion, suggests increased loss of this essential element rather than its increased bioavailability.

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Summary/Sažetak

Istraživanja su pokazala da pušenje cigareta utiče na akumulaciju nekih teških metala u pojedinim tkivima i na metabolizam esencijalnih elemenata. Cilj istraživanja je bio utvrditi razlike koncentracija kadmijuma u krvi i urinu te cinka u urinu pušača i bivših pušača u odnosu na nepušače i utvrditi mogući uticaj koncentracije kadmijuma na ekskreciju esencijalnog elementa cinka. Istraživanjem je obuhvaćeno 106 osoba. Ispitanici su bili stalni pušači (n=51), bivši pušači (n=38) i nepušači (n=17). Za određivanje kadmijuma korištena je metoda atomske apsorpcione spektrofotometrije (AAS) sa elektrotermalnim atomizerom. Cink je određen metodom ASS sa plamenim atomizerom. Utvrđena je značajna razlika u vrijednostima kadmijuma u krvi između skupina: pušači i nepušači ($p < 0.001$), pušači i bivši pušači ($p < 0.001$), te između bivših pušača i nepušača ($p = 0,045$). Postoji značajna pozitivna i jaka korelacija u nivou cinka i kadmijuma u urinu na gram kreatinina, te povećanjem nivoa kadmijuma povećava se i nivo cinka ($\rho = 0.781$; $p = 0.001$). Rezultati naše studije pokazuju da je pušenje faktor koji može povećati nivo kadmijuma u mjeri koja će znatno povećati ekskreciju cinka, tj. njegov povećan gubitak.

In memoriam



**Mustafa Memić
(1963-2020)**

Mustafa Memić, rođen je 18.02.1963. u Sjenici, gdje je završio osnovno i srednje obrazovanje. Zvanje diplomiranog inženjera hemije stekao je na Odsjeku za hemiju Prirodno-matematičkog fakulteta Univerziteta u Sarajevu 1989. godine, gdje je naredne godine izabran za asistenta. Postdiplomski studij je okončao 2001. godine kao i doktorat hemijskih nauka na Prirodno-matematičkom fakultetu u Sarajevu, 2007. godine.

Svoj radni vijek je proveo na Katedri za analitičku hemiju Odsjeka za hemiju Prirodno-matematičkog fakulteta. U zvanje redovnog profesora je izabran 2016. godine. Na Prirodno-matematičkom fakultetu nije bilo samo njegovo radno mjesto, to je od prvih dana njegovog zaposlenja bio njegov drugi dom. Domaćinski, sa puno brige i poštenoga rada je obavljao svoje poslove. Bio omiljen među saradnicima i studentima.

Imao je bogato nastavno-pedagoško iskustvo u radu na više fakulteta Univerziteta u Sarajevu. Posebno uspješne rezultate pokazao je u radu sa studentima Prirodno-matematičkog fakulteta u realizaciji nastave iz većeg broja predmeta u oblasti analitičke hemije. Pod mentorstvom prof. Memića urađen je veliki broj magistarskih radova i završnih radova drugog ciklusa studija, kao i završnih radova prvog ciklusa studija i diplomskih radova. Bio je mentor na dvije uspješno odbranjene doktorske disertacije, a još dvije disertacije je doveo skoro do kraja.

Bio je šef Katedre za analitičku hemiju, šef Odsjeka za hemiju, prodekan za nastavu i naučnoistraživački rad Prirodno-matematičkog fakulteta i od kraja 2016. godine dekan Prirodno-matematičkog fakulteta. Također, bio je aktivni član Društva hemičara i tehnologa Kantona Sarajevo, član redakcijskog odbora „Glasnika hemičara i tehnologa BiH“, saradnik iz oblasti mjeriteljstva u Institutu za mjeriteljstvo BiH, član radne grupe za okolinu u Tehničkom komitetu Instituta za standardizaciju BiH, saradnik Instituta za akreditaciju BiH u svojstvu eksperta-ocjenjivača, predsjednik Skupštine Društva hemičara i tehnologa Kantona Sarajevo, voditelj postdiplomskog studija na Odsjeku za hemiju

Prirodno-matematičkog fakulteta, te stručni saradnik u Centru za istraživanje i razvoj novih metala. Dao je veliki doprinos odbrani Bosne i Hercegovine.

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Živio je životom poštenoga čovjeka. Izuzetan hemičar i sjajan nastavnik, prof. Memić je ostao takav do kraja svog radnog vijeka i prerane smrti. Bio je snažan autoritet ali pri tome skroman i velikodušan čovjek, izuzetno cijenjen među studentima i kolegama. Zbog izuzetno plodnog naučnoga doprinosa te nesebičnog zalaganja za dobrobit Prirodno-matematičkog fakulteta ostat će nam zadatak da se sa puno zahvalnosti sjećamo našeg Mustafe Memića.

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Decimal numbers must have decimal points and not commas in the text (except in the Bosnian/Croatian/Serbian abstract), tables and axis labels in graphical presentations of results. Thousands are separated, if at all, by a comma and not a point.

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e) Patents:

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mp 180°C dec.

bp 98°C

Abbreviations: mp, melting point; bp, boiling point; lit., literature value; dec, decomposition.

2. **Specific Rotation:**

$[\alpha]_{23}^D -222$ (*c* 0.35, MeOH).

Abbreviations: α , specific rotation; D, the sodium D line or wavelength of light used for determination; the superscript number, temperature (°C) at which the determination was made; In parentheses: *c* stands for concentration; the number following *c* is the concentration in grams per 100 mL; followed by the solvent name or formula.

3. NMR Spectroscopy:

^1H NMR (500 MHz, DMSO- d_6) δ 0.85 (s, 3H, CH₃), 1.28–1.65 (m, 8H, 4'CH₂), 4.36–4.55 (m, 2H, H-1 and H-2), 7.41 (d, J 8.2 Hz, 1H, ArH), 7.76 (dd, J 6.0, 8.2 Hz, 1H, H-1'), 8.09 (br s, 1H, NH).

^{13}C NMR (125 MHz, CDCl₃) δ 12.0, 14.4, 23.7, 26.0, 30.2, 32.5, 40.6 (C-3), 47.4 (C-2'), 79.9, 82.1, 120.0 (C-7), 123.7 (C-5), 126.2 (C-4).

Abbreviations: δ , chemical shift in parts per million (ppm) downfield from the standard; J , coupling constant in hertz; multiplicities s, singlet; d, doublet; t, triplet; q, quartet; and br, broadened. Detailed peak assignments should not be made unless these are supported by definitive experiments such as isotopic labelling, DEPT, or two-dimensional NMR experiments.

4. IR Spectroscopy:

IR (KBr) ν 3236, 2957, 2924, 1666, 1528, 1348, 1097, 743 cm^{-1} .

Abbreviation: ν , wavenumber of maximum absorption peaks in reciprocal centimetres.

5. Mass Spectrometry:

MS m/z (relative intensity): 305 (M⁺H, 100), 128 (25).

HRMS–FAB (m/z): [M+H]⁺calcd for C₂₁H₃₈N₄O₆, 442.2791; found, 442.2782.

Abbreviations: m/z , mass-to-charge ratio; M, molecular weight of the molecule itself; M⁺, molecular ion; HRMS, high-resolution mass spectrometry; FAB, fast atom bombardment.

6. UV-Visible Spectroscopy:

UV (CH₃OH) I_{max} (log e) 220 (3.10), 425 nm (3.26).

Abbreviations: I_{max} , wavelength of maximum absorption in nanometres; e, extinction coefficient.

7. Quantitative analysis:

Anal.calcd for C₁₇H₂₄N₂O₃: C 67.08, H 7.95, N 9.20. Found: C 66.82, H 7.83, N 9.16. All values are given in percentages.

8. Enzymes and catalytic proteins relevant data:

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